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# **RAPID INTERVENTION WITH GLYCERYL TRINITRATE IN HYPERTENSIVE STROKE TRIAL-2 (RIGHT-2): SAFETY AND EFFICACY OF TRANSDERMAL GLYCERYL TRINITRATE, A NITRIC OXIDE DONOR**

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## **Introduction:**

High blood pressure (BP) is common in acute stroke and is associated with poor outcome. Previous hospital-based trials testing the effects of BP lowering on functional outcome have been inconclusive. The PIL-FAST and RIGHT pilot trials confirmed the feasibility of performing single-centre ambulance-based stroke trials in the UK. In both RIGHT and a subgroup of patients recruited within 6 hours into the large ENOS trial, transdermal glyceryl trinitrate (GTN, a nitric oxide donor) lowered BP and reduced death or disability. Based on these results, the Rapid Intervention with Glyceryl trinitrate in Hypertensive Stroke Trial-2 (RIGHT-2) is testing the safety and efficacy of transdermal GTN in the pre-hospital setting.

## **Methods**

Over 1250 Paramedics from 7 UK ambulance services serving over 40 comprehensive or primary stroke care centres are screening, consenting, randomising and treating 1050 patients presenting within 4 hours of FAST-positive stroke and with systolic BP >120

mmHg. Treatment comprises GTN or similar sham patch, and is continued in hospital for 3 days. The primary outcome is the modified Rankin Scale at day 90. Secondary outcomes include vascular events, disability, quality of life, mood and cognition. Neuroimaging and biomarkers are examining potential mechanisms of action.

### **Status**

Recruitment commenced in October 2015. As of [Friday 13<sup>th</sup> October 2017, 767](#) patients have been recruited from seven ambulance trusts conveying patients into [46](#) active stroke centres. Experiences with the trial and baseline characteristics of the recruited patients-to-date will be presented.